



28026 U.S. PTO

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

22278 U.S. PTO
10/821237



Applicant: Gregory S. Kelley
Serial No.: Unknown Examiner: Unknown
Filed: April 8, 2004 Group Art Unit: Unknown
Docket: 1001.1753101 Customer No.: 28075
For: CUTTING BALLOON CATHETER AND METHOD FOR BLADE
MOUNTING

TRANSMITTAL SHEET

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

CERTIFICATE UNDER 37 C.F.R. 1.10: The undersigned hereby certified that this paper or papers, as described herein are being deposited in the United States Postal Service, "Express Mail Post Office to Addressee" having an Express Mail mailing label number of: EV 315613643 US, in an envelope addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 8th day of April 2004.

By Kathleen L. Bookley
Kathleen L. Bookley

We are transmitting herewith the attached Patent Application including the following:

☒ NINETEEN (19) Sheet(s) of Specification

☒ TWENTY-SIX (26) Claim(s)

☒ ONE (1) sheet of Abstract

☒ THREE (3) Sheet(s) of Formal Drawings

☒ Executed Declaration and Power of Attorney

☐ Small entity status under 37 C.F.R. §§ 1.9 and/or 1.27 is claimed

☒ An Assignment of the invention to SciMed Life Systems, Inc., is being filed contemporaneous with this patent application

☐ A certified copy of a _____ application, Serial No. _____, filed _____, the right of priority of which is claimed under 35 U.S.C. § 119.

CLAIMS AS FILED						
	(1)	(2)	Small Entity		Other	
For:	# Filed	# Extra	Rate	Fee	Rate	Fee
Basic Fee	1	0		\$385		\$770
Total Claims	26 - 20 =	6	X 9 =	\$	X 18 =	\$108
Independent Claims	3 - 3 =	0	X 43 =	\$	X 86 =	\$0
() Multiple Dependent Claim Presented			+ 145 =	\$	+ 290 =	\$0
TOTAL			\$		\$878	


*If the difference in Column (1) is less than zero, enter "0" in column 2.

[] Other _____.

[XX] A check in the amount of \$878.00 is enclosed.

[XX] Return Receipt Postcard (MPEP 503).

[XXXX] Please charge any deficiencies or credit any overpayment in the enclosed fees to Deposit Account No. 50-0413.

By: 
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